State of Nevada

Department of Business and Industry

Nevada Transportation Authority

Application for a Sale and Transfer of a Certificate or Order and Permit to Transport Passengers or Household Goods filed pursuant to NAC 706.1375.

(Check one type of carrier) Common Carrier Contract Carrier	(Check one type of service) Taxi Cab Household Goods Mover Other Passenger Carrier (not bus)
In the matter of the application of	
dba	
for authority to sell and transfer;	and
dba	
	e or Permit number
accordance with NAC 706.137	s hereto; exhibits that include all of the information required (2) (a through u). the Nevada Transportation Authority enter its order granting
Dated at	_Nevada, thisday of20
x	X
Attorney' signature (if any)	Applicant's signature
Attorney's printed name	Applicant's printed name
Attorney's address	Applicant's mailing address
Attorney's address cont.	Applicant's address cont.
Attorney's phone number	Applicant's phone number
Attorney's facsimile number	Applicant's facsimile number
Attornov's amail address	Applicant's amail address

Filing Instructions:

Make certain your application is complete and accurate. Incomplete applications or those with illegible text may be rejected.

Do not enclose original or copies within binders, folders, or other devices. Preferred methods are a single staple, or binder clips.

Be certain to insert labeled tabs between exhibits. If an exhibit does not apply to you insert a page explaining that the exhibit does not apply.

When complete, file an original and 7 copies of this application along with the required filing fee and estimated publication costs paid by check or money order to:

Nevada Transportation Authority 2290 South Jones Boulevard Suite 110 Las Vegas, NV 89146

Our office hours are 8:00 am to 5:00 pm Monday through Friday, excluding holidays.

If you have any questions, call us at (702) 486-3303.

General information	Extension 400
Application information or docket status	Extension 409
Tariff information	Extension 410
Fax number	702 486-2590

Included in this application packet is a checklist of attachments and exhibits to help you put together a complete application. For detailed explanation and instruction for each exhibit, you must refer to the most current NAC 706.1375 (2) (a through u). Your application cannot be completed without referring to NAC Chapter 706 for instructions.

Please notice that the exhibits are labeled (a) through (u) to correspond with the NAC 706.1375 (2) (a through u).

	DATH
STATE OF)
)
COUNTY OF)
	, being duly sworn,
,	te relationship to applicant, i.e.: owner, title
	; that, in such
capacity, I am qualified and authorized to	o file and verify such application; that I have
carefully examined all the statements an	d matters contained in the application; and
that all such statements made and matter	ers set forth therein are true and correct to
the best of my knowledge, information, a	and belief. Affiant further states that the
application is made in good faith and pre	esents evidence in support of said application
on every particular requested by the Nev	ada Transportation Authority.
	Signature of Affiant
Subscribed and sworn to before me this	
day of,	
Notary Public	
	Signature of Attorney, if any

Therefore, the joint applicants request the Nevada Transportation Authority enter its order granting the Certificate transfer.

Dated the	_day of	
Signature of Seller	 Signature	e of Buyer
Name of Seller (print or type)	Name o	f Buyer (print or type)
Physical Address	Physical	Address
Mailing Address	Mailing A	address
City, State, Zip	City, Stat	е, Zip
Phone Fax	Phone	Fax
Applicants' Attorney (if any)		
Signature of Attorney		
Name of Attorney (print or type)	_	
Address	_	
City, State, Zip		
Phone Fax	<u> </u>	

OATH OF SELLER

STATE OF)	
COUNTY OF) SS	
	helica del como accorde de Challina	. 11
as (indicate relationship to seller association, partner of application; that I happlication; and that all such states	er, that is, owner or proprietor, title as officer of applicant corporation partnership or other authorized representative of a that in such capacity I am qualified and authorized to have carefully examined all the statements and matters contained ements made and matters set forth therein are true and correct to the b f. Affiant further states the application is made in good faith, with the	oration or applicant) offile and ed in the est of my
	Signature of Affiant	
Subscribed and sworn to before me Notary Public, in and for the state county above named, this, 20	and	
Notary Public	(Seal)	
STATE OF	OATH OF BUYER) SS	
COUNTY OF)	
verify such application; that I happlication; and that all such states	, being duly sworn, state that I file this apper, that is, owner or proprietor, title as officer of applicant corporation partnership or other authorized representative of a that in such capacity I am qualified and authorized to have carefully examined all the statements and matters contained aments made and matters set forth therein are true and correct to the best. Affiant further states the application is made in good faith, with the thereof in every particular.	oration or applicant) of file and ed in the est of my
	Signature of Affiant	
Subscribed and sworn to before me Notary Public, in and for the state a county above named, this, 20	e, a and day of	
Notary Public	(Seal)	

LETTER TO ALL APPLICANTS FOR A CERTIFICATE TO PROVIDE INTRASTATE TRANSPORTATION OF PASSENGERS OR HOUSEHOLD GOODS

To All Applicants:

Nevada Administrative Code (NAC) Chapter 706 relates to the regulation and licensing of motor carriers regulated by the Nevada Transportation Authority ("NTA"). It is essential for you to understand and comply with selected statutes and regulations in order to successfully obtain a Certificate of Public Convenience and Necessity from the NTA.

To ensure that you understand the regulations governing the transportation industry, you will need to reference Nevada Revised Statutes (NRS) 706 and Nevada Administrative Code (NAC) 706. All Nevada Statutes and Regulations are available on the Legislative website at www.leg.state.nv.us. For your convenience, direct links to NRS 706 and NAC 706 are available on the NTA website homepage at the "Statutes and Regulations" tab. You may also obtain a copy of N.R.S. 706 &/or N.A.C. 706 from the NTA for a nominal copy charge.

NAC 706.1375(2) lists the required contents for applications for a certificate to provide intrastate transportation of passengers or household goods in the state of Nevada. NAC 706.1375(3) states that if the Applicant does not cure any deficiency in the application within fifteen (15) working days after a request from the NTA, the NTA shall move that the application be dismissed.

When your application is filed, it will be assigned a docket number, by which the NTA will reference your filings. Please refer to your docket number on any correspondence or conversations you have with our staff.

If you have any questions relating to the completion of this application, please call our Las Vegas office at (702) 486-3303 or our Reno office at (775) 688-2800. If you have specific questions that require a legal or detailed analysis, please contact an attorney.

Respectfully,

Marilyn Skibinski Deputy Commissioner

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF LETTER TO APPLICANTS FOR A CERTIFICATE TO PROVIDE INTRASTATE TRANSPORTATION OF PASSENGERS OR HOUSEHOLD GOODS

To the Nevada Transportation Authority:
I have read and understand the contents of the letter addressed to all applicants for a certificate to provide intrastate transportation of passengers or household goods, which was included in my application packet.
Signature
Printed Name
Date

Checklist for attachments and exhibits for: Application for a Certificate to Provide Intrastate Transportation of Passengers or Household Goods filed pursuant to NAC 706.1375

	Attach completed cover page (1st page) of this application.
	Attach completed OATH page.
	Attach completed ACKNOWLEDGMENT OF RECEIPT OF LETTER TO APPLICANTS FOR CERTIFICATE TO PROVIDE INTRASTATE TRANSPORTATION OF PASSENGERS OR HOUSEHOLD GOODS.
	Attach this completed Checklist.
	Identify the market the applicant intends to service, demonstrating that such market will support the proposed operations.
	Label and Tab EXHIBIT (a) The type of service, if any, presently being performed by the applicant, a general description of the service and a reference to the authority pursuant to which the service is being performed.
	Label and Tab EXHIBIT (b) The type of service proposed, a general description of the service, and a reference to the authority pursuant to which the service is to be performed.
	Label and Tab EXHIBIT (c) The specific authority requested and the statutory provision pursuant to which the certificate is requested.
3	Label and Tab EXHIBIT (d) If the applicant proposes to be a carrier of household goods, a description of the types of household goods proposed to be transported.
	Label and Tab EXHIBIT (e) The geographical area proposed to be served pursuant to the certificate, including, without limitation, the terminal and other points to be served, the number and location of points where equipment will be located, and a concise, narrative description of the proposed route.
ב	Label and Tab EXHIBIT (f) A map or sketch of the route and points to be served, drawn to a suitable scale which is indicated on the map or sketch. The map or sketch must show present and proposed operations by distinctive coloring or marking.
ב	Label and Tab as EXHIBIT (g) If the applicant proposes to be a contract carrier, a copy of each proposed contract.

Label and Tab as EXHIBIT (h) A statement of the rates or fares proposed to be charged and the rules governing service in the form of a tariff prepared pursuant to NAC 706.138 to 706.139, inclusive.
Label and Tab as EXHIBIT (i) The type and number of units of equipment to be used in the proposed service and a statement as to which units of equipment are owned by the applicant that includes, without limitation, photographs of the equipment to be used and a copy of the registration and title of each vehicle currently owned by the applicant which will be used under its operating authority. If the applicant proposes to operate a taxicab service, the application must include the proposed color scheme of the vehicles that will be used to provide the taxicab service.
Label and Tab as EXHIBIT (j) A statement indicating the frequency of the proposed service. If on-call service is proposed, the application must set forth the conditions under which the service would be performed.
Label and Tab as EXHIBIT (k) A statement of the qualifications and experience of the personnel who will manage and operate the proposed service, and the proposed operating procedures relating to service, safety, maintenance, the training of drivers, billing, relations with customers and the keeping of records.
Label and Tab as EXHIBIT (1) A statement describing the facilities which will be used to provide the proposed service, such as terminals, shops, warehouses or offices.
Label and Tab as EXHIBIT (m) Facts showing that the proposed operation is or will be beneficial to the traveling public.
Label and Tab as EXHIBIT (n) If the applicant is a corporation or a limited-liability company, a copy of its articles of incorporation or articles of organization, certified by the Secretary of State, and all effective amendments thereto. If the corporation or limited-liability company was incorporated or established in another state, the application must include: 1. A copy of the certificate issued by the office of the Secretary of State authorizing the corporation or limited-liability company to transact its business in the State of Nevada: or 2. Its equivalent, as provided in NRS 80.120.
Label and Tab as EXHIBIT (o) If the applicant is a partnership, a copy of the partnership agreement and any amendments made thereto.
Label and Tab as EXHIBIT (p) If the applicant is not a natural person, a list of all owners, including associated stock certificates, membership certificates or associated documents, along with the percentage of ownership interest of each partner, member or owner. If the applicant is a publicly traded corporation, the requirements of this paragraph may be satisfied by attaching to the application a copy of the Form 10-K or its equivalent filed with the Securities and Exchange Commission shows the controlling ownership, officers and directors in lieu of the list of all owners, including associated stock certificates, membership certificates or associated documents.

	Label and Tab as EXHIBIT (q)
	Evidence that the applicant is financially able to operate the proposed business, including,
	without limitation:
	1. A statement of income for the 12-month period immediately preceding the application.
	2. A pro forma statement of income for the first 12-month period, presented in a monthly
	basis format, of the proposed operation using the proposed rates. The Nevada
	Transportation Authority may require, as a condition to the granting of the application, that the applicant is prohibited from placing into service more vehicles than the vehicles
	projected in the pro forma statement for any period that the Nevada Transportation
	Authority deems necessary to ensure that the granting of the application will not
	unreasonably and adversely affect other carriers operating in the territory.
	3. A balance sheet which was prepared not more than 6 months before the date of the
	application which: (I) For a sole proprietorship or partnership, must reflect the personal
	and business operations of the sole proprietor or each general partner. (II) For a
	corporation, limited-liability company or partnership, must reflect the entire business operations.
	4. A list of the names and addresses of all transportation entities owned by or under the
	control of the applicant.
	NOTE: All financial statements must be prepared pursuant to generally accepted accounting
	principles, except that the personal financial statement of a sole proprietor or general partner
	may be prepared on the basis of estimated values.
\Box	Label and Tab as EXHIBIT (r)
7	If the applicant is operating under a fictitious name, a copy of the certificate filed pursuant to
	chapter 602 of NRS, if applicable.

☐ Label and Tab as EXHIBIT (t)

☐ Label and Tab as EXHIBIT (s)

If the applicant is proposing to transport and store household goods and effects, proof that the applicant has the ability to store such goods and effects in a warehouse operated in accordance with the requirement of chapter 712 of NRS. As used in this paragraph, "warehouse" includes, without limitation, any structure used for the reception and storage of household goods and effects.

☐ Label and Tab as EXHIBIT (u)

Additional information as is necessary for a full understanding of the application.

Evidence that the applicant can secure the insurance required by NAC 706.191.

NOTE: For Data Request #1, personal financial information that includes social security numbers, account numbers, etc., may be submitted with the application in a separate envelope (containing an original and one copy) to ensure confidentiality.

Rev 12/10/12

BRIAN SANDOVAL Governor

STATE OF NEVADA



DEPARTMENT OF BUSINESS AND INDUSTRY NEVADA TRANSPORTATION AUTHORITY

BRUCE BRESLOW

Director B&I

ANDREW J. MACKAY
Chairman
MONICA B METZ
Commissioner
GEORGE ASSAD
Commissioner

Dear Applicant:
Attached is Staff's Data Request No. 1. This Data Request is additional information that is required in order for Staff to review your Application. This information can be submitted in

Re: Applications for Fully Regulated Authority - Data Request 1

required in order for Staff to review your Application. This information can be submitted in conjunction with your Application as a separate Exhibit or within sixty (60) days of filing your Application.

In responding, please: (1) label each response with the number of the question to which it responds; (2) indicate the author of each response; (3) forward material in one response (please do NOT forward material as available); (4) state reasons for not furnishing complete responses; (5) identify by date and author all responsive documents withheld; and (6) furnish partial responses if complete responses cannot be furnished.

Once the responses (original and one copy) are prepared, please call to schedule an appointment to submit and go over the documents with Authority Staff. If you are unable to come to our Las Vegas office location, the documents may be delivered to our office and a telephone conference scheduled. If no response is received within sixty (60) days of filing your Application and there are no alternative arrangements made, Staff will move to dismiss your application pursuant to NAC 706.1375(3).

Please contact me at (702) 486-3303, Ext. 409 if clarification of any item is required.

Sincerely,

Liz Babcock, CPA Application Manager

Docket No.

Website: www.nta.nv.gov

NEVADA TRANSPORTATION AUTHORITY

Staff's Da	ta Reg	uest	No.	1
Docket N	0.	_		

- 1. Identify where the money is coming from to fund the requested operation and provide copies of supporting documentation, such as copies of bank statements, brokerage statements, etc.
- 2. Provide letters of intent, contact information and a summary of anticipated revenue by letter of intent for the market identified in the application. The summary of anticipated revenue should correlate with your revenue projections on the pro-forma income statement.
- 3. Provide the following for *each owner* of the company:
 - a. A statement of personal net worth. <u>Include supporting documentation for all assets and liabilities</u> listed, such as bank and brokerage statements, property records, property appraisals, credit card statements, mortgage loan statements, vehicle titles, etc.
 - b. Complete and return the enclosed "Credit Report Authorization Form".
 - c. Copies of the Federal Income Tax Return and all supporting schedules for the most recent two (2) years.
 - d. Complete and mail directly to the IRS the enclosed IRS Form 4506T, "Request for Transcript of Tax Form", for the most recent two (2) years.
- 4. Provide the following for the *company* requesting authority:
 - a. <u>Supporting documentation for all assets and liabilities</u> listed on the balance sheet included in the application.
 - b. Pro-forma balance sheet presented on an accrual basis as of the <u>first day</u> of operations as though the company is fully funded with <u>all anticipated vehicles</u> in the assets section and any related vehicle loan amounts in the liabilities section. Please include twelve (12) months of principal only payments in the current liabilities section and the remainder of the payments in the long-term liabilities and include a narrative description for each asset and liability line item listed on the pro-forma balance sheet.
 - i. Review NAC 706.149 and NAC 706.152 with regards to equity capital requirements, in preparing the pro-forma balance sheet information. The pro forma balance sheet must show 20% equity on day one of operations (calculated as total equity divided by total assets).
 - ii. The pro-forma balance sheet must show a current ratio of at least 1 to 1 (calculated as total current assets divided by total current liabilities) and sufficient cash reserves to meet three (3) months' of all cash fixed expenses.
 - iii. Review NAC 706,208 if vehicles will be leased.

Docket No. <> 2 of 2

c. Provide a narrative description for each revenue and expense line item listed on the proforma income statement included in the application. A narrative description includes an explanation of the revenue/expense and a calculation, breakdown, or quote to explain how the amount was projected. Please note that using "based on experience" or "percentage of revenue" is not acceptable unless additional substantiation is provided (i.e., prior historical data).

- d. Copies of the most recent twelve months' bank statements.
- e. Copies of the Federal Income Tax Return and all supporting schedules for the most recent two (2) years.
- f. Complete and mail directly to the IRS the enclosed IRS Form 4506T, "Request for Transcript of Tax Form", for the most recent two (2) years.
- 5. Provide an anticipated equipment depreciation schedule. This schedule should list <u>all</u> anticipated vehicles or other items, their cost, any estimated salvage value, and the calculation of the related depreciation expense on a <u>straight-line</u> basis.
- 6. Provide the number of drivers you will be employing in Nevada intrastate service and their anticipated work schedule. This should correlate with your revenue projections, business plan and pro-forma payroll and payroll tax expenses.

NEVADA TRANSPORTATION AUTHORITY Credit Report Authorization Form

Authorization is hereby granted to the Nevada Transportation Authority (hereinafter "NTA") to obtain a consumer credit report through a credit reporting agency chosen by the NTA. I understand and agree that the NTA intends to use the consumer credit report for the purpose of evaluating my financial fitness.

C	Company Na	me				
I	Oocket No.					
informati Authoriz reproduc	ion which I i ation is furtl tion of this f	authorizes the rele have supplied to the her granted to the form if required to her credit report.	he NTA in c credit repor	connection v	with such ever to use a photon	aluation. otostatic
Social Sec	curity Numbe	er		Social Sec	curity Numbe	r
Applicant	's Name (Pri	nt)		Applicant'	's Name (Prir	nt)
Applicant	's Signature			Applicant'	s Signature	
Address:				Address:		
Number	Street			Number	Street	
City	State	Zip Code		City	State	Zip Code
 Date				Date		

Form **4506-T** (Rev. January 2012)

(Rev. January 2012)
Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

▶ Request may be rejected if the form is incomplete or illegible.

OMB No. 1545-1872

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return. 1a Name shown on tax return. If a joint return, enter the name 1b First social security number on tax return, individual taxpayer identification shown first. number, or employer identification number (see instructions) 2a If a joint return, enter spouse's name shown on tax return. 2b Second social security number or individual taxpayer identification number if joint tax return 3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions) Previous address shown on the last return filed if different from line 3 (see instructions) If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. NEVADA TRANSPORTATION AUTHORITY / 2290 SOUTH JONES BLVD. SUITE 110 LAS VEGAS NV 89146 / 702-486-3303 Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your IRS transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party. Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . \square Verification of Nonfiling, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days. Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2010, filed in 2011, will not be available from the IRS until 2012. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days. Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments. Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately. Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved identity theft on your federal tax return. Caution. Do not sign this form unless all applicable lines have been completed. Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. Note. For transcripts being sent to a third party, this form must be received within 120 days of the signature date. Phone number of taxpayer on line 1a or 2a Signature (see instructions) Date Sign Here Title (if line 1a above is a corporation, partnership, estate, or trust) Spouse's signature Date

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at www.irs.gov/form4506. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

CAUTION. Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note. If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns. Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If yo	ou file	∍d a	ın
indi	vidua	al re	turn
and	livec	l in:	;

Connecticut, Delaware,

Florida, Georgia, Maine,

Maryland, Massachusetts

Missouri, New Hampshire.

New Jersey, New York,

North Carolina, Ohio, Pennsylvania, Rhode

Island, South Carolina,

Vermont, Virginia, West

Virginia

District of Columbia.

Mail or fax to the "Internal Revenue Service" at:

and lived in:	Service" at:		
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the	RAIVS Team Stop 6716 AUSC Austin, TX 73301		
Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	512-460-2272		
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota,	RAIVS Team Stop 37106 Fresno, CA 93888		
Utah, Washington, Wisconsin, Wyoming	559-456-5876		

RAIVS Team

Stop 6705 P-6

816-292-6102

Kansas City, MO 64999

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to the "Internal Revenue Service" at:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota. Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address

RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

801-620-6922

Connecticut,
Delaware, District of
Columbia, Georgia,
Illinois, Indiana,
Kentucky, Maine,
Maryland,
Massachusetts,
Michigan, New
Hampshire, New
Jersey, New York,
North Carolina,
Ohio, Pennsylvania,
Rhode Island, South
Carolina, Tennessee,
Vermont, Virginia,
West Virginia,
Wisconsin

RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250

859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P. O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Products Coordinating Committee
SE:W:CAR:MP:T:M:S
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see Where to file on this page.